traditional prophylactic measures have failed, a trial of propranolol is worthwhile.

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Lactase Deficiency, Geriatric and Ethnic Considerations

MILK HAS LONG BEEN looked upon almost reverently as the perfect food. Almost 50 percent of the caloric value of breast milk is accounted for by the lactose content. Specific lactase deficiency in the newborn, often produces symptoms after the first few feedings. This probably has a congenital hereditary basis.

A very high lactase level in the newborn is not usually maintained into adult life. Adequate lactase production may occur into the fifth and sixth decades in persons of Scandanavian background. Other racial groups develop lactase deficiency early in life. Specific lactase deficiency has a very high incidence in American Negroes. This deficiency appearing early in life is also common in India and in Greek Cypriots, Arabs and Ashkenazi Jews.

There is a quantitative aspect to lactase deficiency. In our own society the quantity of milk intake by adults may not be high enough to give rise to symptoms until the patient is put on frequent feedings for treatment of peptic disease. Most of these feedings involve a great deal of milk. In geriatric practice it is safe to assume that patients complaining of functional distress, gas, cramps, flatulence and at times diarrhea, alternating with constipation, may be greatly benefited by removing milk from the diet.

It has not been established whether or not specific lactase deficiency is an important aspect of the aggravation of regional enteritis by milk. The specific tests for lactase deficiency are less satisfactory than indirect tests. Three weeks of careful milk-free diet followed by a milk challenge, which produces symptoms, is a valid test. In infants evidence of conversion of lactose to glucose, following a lactose test meal, is a valid test of the adequacy of lactase production.

Aside from being iron-deficient, milk is far from a perfect food for persons who suffer from specific lactase deficiency or from specific milk protein allergy. The specific lactase deficiency problem has both age and ethnic group relationships.

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Hypothyroidism—Do We Finally Have a Single Test?

ADVANCES IN METHOD have made the radioimmunoassay of human thyrotropin (TSH) available to the physician in practice for diagnosis of hypothyroidism. The normal ranges of TSH by this method have been defined. It may be assumed that elevated levels of TSH are a sensitive index of primary hypothyroidism. In fact TSH is a more sensitive index of thyroid damage than the level of circulating hormone. Conversely, normal levels of TSH allow one to confidently exclude the diagnosis of hypothroidism.

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